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Fill in this information to identify your case:					
Debtor 1	Michael Reinhart				
	First Name	Middle Name	Last Name		
Debtor 2	Susan Reinhart				
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the: E	District of New Jersey	 -		
	(If known)				

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ <u>540,000.00</u>
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 105,868.61
1c. Copy line 63, Total of all property on Schedule A/B	\$ 645,868.61
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$ <u>414,050.94</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$2,168.28
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$377,087.14
Your total liabilities	\$ <u>793,306.36</u>
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ <u>9,568.22</u>
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	_. 6,718.71

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Michael Reinhart & Susan Reinhart

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

22-15254 Case number (if known)

Debtor 1

Middle Name

Р	art 4: Answer These Questions for Administrative and Statistical Records					
6.	. Are you filing for bankruptcy under Chapters 7, 11, or 13?					
	No. You have nothing to report on this part of the form. Check this box and submit this fo✓ Yes	orm to the court with your other schedules.				
7.	What kind of debt do you have?					
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.					
	☐ Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	of the form. Check this box and submit				
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.					
9. Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :						
		Total claim				
	From Part 4 on <i>Schedule E/F</i> , copy the following:					
	9a. Domestic support obligations (Copy line 6a.)	\$				
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$				
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$				
	9d. Student loans. (Copy line 6f.)	\$220,731.00				
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$				

9g. Total. Add lines 9a through 9f.

0.00

222,899.28

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				Boodinone	· ugu		
I	Fill in this information to identify your case:						
Ī	Debtor 1	Michael Reinhart	Middle Name	Last Name			
	Debtor 2 (Spouse, if filing)	Susan Reinhart	Middle Name	Last Name			
		Bankruptcy Court for the Dist		Last Name			
		22-15254					
	(II KIIOWII)						

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Did you pay or agree to pay someone wh	o is NOT an attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
	nave read the summary and schedules filed with this declaration and
Under penalty of perjury, I declare that I he that they are true and correct.	nave read the summary and schedules filed with this declaration and
	nave read the summary and schedules filed with this declaration and
	nave read the summary and schedules filed with this declaration and
that they are true and correct.	
that they are true and correct. /s/ Michael Reinhart	/s/ Susan Reinhart

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Fill in this information to identify your case:					
Debtor 1	Michael Reinhar	t			
	First Name	Middle Name	Last Name		
Debtor 2	Susan Reinhart				
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: _ District of New Jersey					
Case number	22-15254		,		
(If known)			_		

Check if this is	
An amend	ed filing

A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse		
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employed	Employed Not employed		
Include part-time, seasonal, or self-employed work.					
Occupation may include student or homemaker, if it applies.		Holts Precision, Inc.	Di Cara Rubino Architects PC		
	Employer's name				
	Employer's address	400 Chapel Road, Unit 3A	30 Galesi Drive West Wing		
		Number Street	Number Street		
		South Windsor, CT 06074	Wayne, NJ 07470		
		City State ZIP Code	City State ZIP Code		
	How long employed there	? 2 years	4 years		

Part 2: Giv

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	
3.	Estimate and list monthly overtime pay.	

2. \$\ 6,666.66 \ \$\ 6,333.34 \ 3. +\$\ 0.00 \ + \$\ 0.00

For Debtor 2 or non-filing spouse

For Debtor 1

4. Calculate gross income. Add line 2 + line 3.

\$ 6,666.66

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		For Debtor 1	For Debto		
Copy line 4 here=	→ 4.	\$ 6,666.66		333.34	
5. List all payroll deductions:	-	Ψ	Ψ		
5a. Tax, Medicare, and Social Security deductions	5a.	_{\$} 1,686.79	_{\$} 1,	184.11	
5b. Mandatory contributions for retirement plans	5b.	\$ 0.00	- * \$	0.00	
5c. Voluntary contributions for retirement plans	5c.	\$ 0.00	- '	506.68	
5d. Required repayments of retirement fund loans	5d.	\$ 0.00	- + \$	0.00	
5e. Insurance	5e.	\$ 0.00	- '	554.21	
5f. Domestic support obligations	5f.	\$ 0.00	-	0.00	
5g. Union dues	5g.	\$0.00	\$	0.00	
5h. Other deductions. Specify:	5h.	+\$ 0.00	+ \$	0.00	
		\$	- · Ψ \$		
		\$	\$		
		\$	\$	·	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	_{\$} 1,686.79	_{\$} 2,	244.99	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 4,979.87	\$ <u>4</u> ,	088.35	
,		•			
8. List all other income regularly received:					
 Net income from rental property and from operating a business, profession, or farm 					
Attach a statement for each property and business showing gross					
receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$	0.00	
8b. Interest and dividends	8b.	\$ 0.00	\$	0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent	ent	*			
regularly receive		0.00		0.00	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$	0.00	
8d. Unemployment compensation	8d.	\$0.00	\$	0.00	
8e. Social Security	8e.	\$0.00	\$	0.00	
8f. Other government assistance that you regularly receive					
Include cash assistance and the value (if known) of any non-cash assistar that you receive, such as food stamps (benefits under the Supplemental	nce				
Nutrition Assistance Program) or housing subsidies.		s 0.00	_	0.00	
Specify:	8f.	Ψ	_ \$		
8g. Pension or retirement income	8g.	\$0.00	\$	0.00	
8h. Other monthly income. Specify:	8h.	+ \$0.00	_ + _{\$}	0.00	
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$ 0.00	\$	0.00	
• • • • • • • • • • • • • • • • • • •		*			
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10	\$_4,979.87	+ \$ 4,	088.35	= \$ 9,068.22
.					
 State all other regular contributions to the expenses that you list in Sche- Include contributions from an unmarried partner, members of your household, 			ommatos and o	othor	
friends or relatives.	your c	dependents, your to	ommates, and c	ALI ICI	
Do not include any amounts already included in lines 2-10 or amounts that are	not a	vailable to pay expe	enses listed in S	chedule J.	500.00
Specify: Contribution from son				11. -1	5 00.00
12. Add the amount in the last column of line 10 to the amount in line 11. The	e resu	It is the combined m	nonthly income.		_e 9,568.22
Write that amount on the Summary of Your Assets and Liabilities and Certain S	Statis	tical Information, if it	t applies	12.	φ
					Combined monthly income
13. Do you expect an increase or decrease within the year after you file this No	form	?			
✓ No.✓ Yes. Explain:					
_ 100. Едриян.					